Attorne	ey Docket No.	18153.0035		N.
First In	ventor or Applic	ation Identifier	Michael I. Catherwood	U.
Title	LOW OVERH	EAD INTERRUP	PT .	j1017
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(Only for new nonprovisional applications	under 37 C.F.R. § 1.53(b))	Express Mail Label No.						
APPLICATION		ADDRESS TO Assistant Commissioner for Patents Box Patent Application						
See MPEP chapter 600 concerning design 1. Fee Transmittal Form (e.g., (Submit an original and a duplical see 37 CFR 1.27. 3. Specification (preferred arrangement set for - Descriptive title of the Inventical - Statement Regarding Fed specification - Brief Summary of the Inventical - Brief Description of the Drawical - Detailed Description - Claim(s)	, PTO/SB/17) cate for fee processing) ty status. [Total Pages 24] th below) on Applications onsored R & D	Computer F 8. Nucleotide and/ (if applicable, ai a.	Washington, DC 20231 7. □ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. □ Computer Readable Form (CRF) b. Specification Sequence Listing on: i. □ CD-ROM or CD-R (2 copies); or ii. □ paper c. □ Statements verifying identity of above copies ACCOMPANYING APPLICATIONS PARTS 9. ☒ Assignment Papers (cover sheet & document(s))					
i. DELETION OF INVE Signed statement attached named in the prior application 1.63(d)(2) and 1.33(b). 6. Application Data Sheet. See 17. If a CONTINUING APPLICATION, choor in an Application Data Sheet under 3 Continuation Divisiona Prior application information: For CONTINUATION or DIVISIONAL AP	Total Pages 2 or copy) stion (37 CFR 1.63 (d)) snal with Box 17 completed) NTOR(S) deleting inventor(s) on, see 37 CFR 37 CFR 1.76 eck appropriate box, and suppleted by the series of the series of the secondary	(when the statement of the prior application, nying or divisional application, anying or divisional application.	12. Information Disclosure					
	17. CORRESPO	NDENCE ADDRESS						
☑ Customer Number or Bar Code Labe	☑ Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) Correspondence address below							
Name Edward Pennington Swidler Berlin Shereff Fr	riedman, LLP							
3000 K Street, N.W.	3000 K Street, N.W.							
Address Suite 300	·····							
City Washington	State	D.C.	Zip Code	20007-5116				
Country USA	Telephone	202 424-7500	Fax	202 424-7647				
Name (Print/Type) Robert C	. Bertin	Registration No. (Atto	mey/Agent)	41,488				
Signature	1/4		Date	June 1, 2001				

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FEE TO ANO			Complete if Known						
FEE TRANS		Application Number							
for FY 2	2001	Filing Date	June 1, 2001						
		First Named Inventor	Michael I. Catherwood						
Patent fees are subject to	annual revision.	Examiner Name							
		Group / Art Unit							
TOTAL AMOUNT OF PAYMENT	(\$) 710	Attorney Docket No.	18153.0035						

				1			<u> </u>			<u>. </u>		
METHOD OF PAYMENT (check one)					FEE CALCULATION (continued)							
The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:				3. ADDITIONAL FEES								
". —		indicated fees and credit any over payments to:					Large Entity		Small Entity			
Depos Accou		195127	Orde	#18153.0035			Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
Numbe		133127	, Oldei	#10133.0033			105	130	205	65	Surcharge - late filing fee or oath	
Depos	it						127	50	227	25	Surcharge - late provisional filing fee or cover sheet.	
Accou		Swidler	Berlin	Shereff Friedma	n, LLP		139	130	139	130	Non-English specification	
Name							147	2,520	147	2,520	For filing a request for reexamination	
Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17							112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
Applicant claims small entity status. See 37 CFR 1.27							113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
2.	Paymer	nt Enclose	d:				115	110	215	55	Extension for reply within first month	
□c	heck	☐ Cred	it card	☐ Money Order	☐ Other	,	116	390	216	195	Extension for reply within second month	
							117	890	217	445	Extension for reply within third month	
1. BA	ASIC FIL	ING FEE	-EE C/	ALCULATION			118	1,390	218	695	Extension for reply within fourth month	
Large	Entity S	Small Er	ntity				128	1,890	228	945	Extension for reply within fifth month	
				Fee Description			119	310	219	155	Notice of Appeal	
	,	Code (\$				e Paid	120	310	220	155	Filing a brief in support of an appeal	
				Utility filing fee	710)	121	270	221	135	Request for oral hearing	
				Design filing fee Plant filing fee			138	1,510	138	1,510	Petition to institute a public use proceeding	
108	710 2	208 3	55	Reissue filing fe	Э		140	110	240	55	Petition to revive – unavoidable	
114	150 2	214 7	5	Provisional filling	j fee		141	1,240	241	620	Petition to revive - unintentional	
							142	1,240	242	620	Utility issue fee (or reissue)	
		SUB	TOTAI	_ (1)	(\$)	710	143	440	243	220	Design issue fee	
2. EXTRA	A CLAIN	I FEES					144	600	244	300	Plant issue fee	
				Extra F	ee from	Fee	122	130	122	130	Petitions to the Commissioner	
Total Claims	15	-20**	≃ [Claims b	elow 18 = [Paid 0	123	130	123	130	Petitions related to provisional applications	
Independent Claims	2	-3**	= [o x	80 =	0	126	180	126	180	Submission of Information Disclosure Stmt	
Multiple Dependent				×	=	0	581	40	581	40	Recording each patent assignment per property (times number of properties)	
Large	Entity	Small	Entity	1			146	710	246	355	Filing a submission after final rejection	
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Descript	ion		149	710	249	355	(37 CFR § 1.129(a)) For each additional invention to be	
103	18	203	9	Claims in exc	ess of 20					555	examined (37 CFR § 1.129(b))	1 1
102	80	202	40	Independent	claims in exces	s of 3	179	710	279	355	Request for Continued Examination (RCE)	
104	270	204	135	•	ndent claim, if r	•					, , ,	l
109	80	209	40	original paten			169	900	169	900	Request for expedited examination of a design application	
110	18	210	9	** Reissue cla over original (aims in excess o patent	of 20 and						
SUBTOTAL (2) (\$) 0					(\$) 0		Other fe	e (specify	')			
**or numb	or province	alumaid if		For Poissues as	a abava		*Reduc	ed by Bas	sic Filing	Fee Pa	id SUBTOTAL (3) (\$) 0	

SUBMITTED BY Complete (if applicable)									
Name (Print/Type)	Robert C. Berlin	Registration No. Attorney/Agent)	41,488	Telephone	202 424-7872				
Signature		BS		Date	June 1, 2001				

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